

SERFF Tracking Number: PCAG-127904582 State: Illinois
Filing Company: Podiatry Insurance Company of America State Tracking Number: PCAG-127904582
Company Tracking Number: IL-1757-P
TOI: 11.2 Med Mal-Claims Made Only Sub-TOI: 11.2025 Podiatry
Product Name: Podiatrists Professional Liability Program
Project Name/Number: 2012 Podiatry Rules/IL-1757-P

Filing at a Glance

Company: Podiatry Insurance Company of America

Product Name: Podiatrists Professional Liability SERFF Tr Num: PCAG-127904582 State: Illinois
Program

TOI: 11.2 Med Mal-Claims Made Only

SERFF Status: Closed-Filed

State Tr Num: PCAG-127904582

Sub-TOI: 11.2025 Podiatry

Co Tr Num: IL-1757-P

State Status:

Filing Type: Rule

Reviewer(s): Gayle Neuman

Authors: Latasha Campbell, Jason Sokol

Disposition Date: 06/28/2012

Date Submitted: 12/16/2011

Disposition Status: Filed

Effective Date Requested (New): 07/01/2012

Effective Date (New): 10/01/2012

Effective Date Requested (Renewal): 07/01/2012

Effective Date (Renewal):
10/01/2012

State Filing Description:

routed 3/7/12

General Information

Project Name: 2012 Podiatry Rules

Project Number: IL-1757-P

Reference Organization:

Reference Title:

Filing Status Changed: 06/28/2012

State Status Changed:

Created By: Latasha Campbell

Corresponding Filing Tracking Number:

Filing Description:

With this filing we are submitting for your approval revisions to certain rating rules, along with format changes to the entire rating manual, for the company's Podiatrists Professional Liability Program.

State Narrative:

Status of Filing in Domicile: Pending

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

Submitted By: Latasha Campbell

Company and Contact

Filing Contact Information

Latasha Campbell, Regulatory Compliance

lcampbell@picagroup.com

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Analyst

3000 Meridian Boulevard 615-371-8776 [Phone] 2201 [Ext]
 Suite 400 615-324-9161 [FAX]
 Franklin, TN 37067

Filing Company Information

Podiatry Insurance Company of America	CoCode: 14460	State of Domicile: Illinois
3000 Meridian Boulevard	Group Code: 2698	Company Type:
Suite 400	Group Name:	State ID Number:
Franklin, TN 37067	FEIN Number: 58-1403235	
(800) 251-5727 ext. [Phone]		

Filing Fees

Fee Required? No
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Podiatry Insurance Company of America	\$0.00		

State Specific

Refer to our checklists prior to submitting filing

(http://www.idfpr.com/DOI/Prop_Cas_IS3_Checklists/IS3_Checklists.htm): Yes

Refer to our updated (04/06/2007) SERFF General Instructions prior to submitting filing. They have been updated to clarify what rates and rules are required to be filed as well as what rates and rules are not required to be filed. Also, the "Product Name" is the Filing Title and not the Project Number.: Yes

NO RATES and/or RULES ARE REQUIRED TO BE FILED FOR LINES OF COVERAGE SUCH AS COMMERCIAL AUTO (except taxicabs), BURGLARY AND THEFT, GLASS, FIDELITY, SURETY, COMMERCIAL GENERAL LIABILITY, CROP HAIL, COMMERCIAL PROPERTY, DIRECTORS AND OFFICERS, ERRORS AND OMISSIONS, COMMERCIAL MULTI PERIL just to mention a few. However, a Summary Sheet (RF-3) is required to be filed. Please refer to the State Specific Field below for what rates/rules are required to be filed and to our checklists for specific statutes, regulations, etc. : http://www.idfpr.com/DOI/Prop_Cas_IS3_Checklists/IS3_Checklists.htm: N/A

Medical Malpractice rates/rules may only be submitted in paper.: N/A

The only rates and/or rules that are required to be filed are Homeowners, Mobile Homeowners, Dwelling Fire and Allied

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Lines, Workers' Compensation, Liquor Liability, Private Passenger Automobiles, Taxicabs, Motorcycles and Group Inland Marine Insurance which only applies to insurance involving personal property owned by, being purchased by or pledged as collateral by individuals, and not used in any business, trade or profession per Regulation Part 2302 which says in part, "each company shall file with the Director of Insurance each rate, rule and minimum premium before it is used in the State of Illinois.": N/A

When selecting a form filing type for a multiple form filing, use the dominant type from these choices: APP - application; CER - certificate; COF - coverage form; DPS - declaration page; END - endorsement; POJ - policy jacket; ORG - Companies adopting an Advisory or Rating Organization's filing. Example: If you are submitting a policy as well as endorsements, a declaration page and an application, you would select "POL" for policy.: N/A

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Gayle Neuman	06/28/2012	06/28/2012

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Gayle Neuman	01/26/2012	01/27/2012	Latasha Campbell	02/08/2012	02/09/2012
Pending Industry Response	Gayle Neuman	01/06/2012	01/06/2012	Latasha Campbell	01/06/2012	01/10/2012

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Rate	Risk Management Discount	Latasha Campbell	04/18/2012	04/18/2012
Rate	Premium Payment Plan	Latasha Campbell	12/27/2011	12/27/2011

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Effective Date	Note To Reviewer	Latasha Campbell	06/28/2012	06/28/2012
effective date	Note To Filer	Gayle Neuman	06/28/2012	06/28/2012

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status	Note To Filer	Gayle Neuman	06/22/2012 06/22/2012
Filing Status	Note To Reviewer	Latasha Campbell	06/21/2012 06/21/2012
pending	Note To Filer	Gayle Neuman	05/15/2012 05/15/2012
Filing status	Note To Reviewer	Latasha Campbell	05/14/2012 05/14/2012
status	Note To Filer	Gayle Neuman	03/13/2012 03/13/2012
Filing Status	Note To Reviewer	Latasha Campbell	03/13/2012 03/13/2012

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Disposition

Disposition Date: 06/28/2012

Effective Date (New): 10/01/2012

Effective Date (Renewal): 10/01/2012

Status: Filed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Explanatory Memorandum		Yes
Supporting Document	Form RF3 - (Summary Sheet)		Yes
Supporting Document (revised)	Certification		Yes
Supporting Document	Certification		Yes
Supporting Document	Manual		Yes
Rate (revised)	Administrative Defense Coverage		Yes
Rate	Administrative Defense Coverage		Yes
Rate	Ambulatory Surgical Center		Yes
Rate	Business Premises Liability & Personal Injury Liability Coverage		Yes
Rate	Claims-Free Discount		Yes
Rate	Corporations		Yes
Rate	Employed Podiatrist Discount		Yes
Rate (revised)	Extended Reporting Period Coverage		Yes
Rate	Extended Reporting Period Coverage		Yes
Rate	Limits of Liability		Yes
Rate (revised)	Leave of Absence		Yes
Rate	Leave of Absence		Yes
Rate	Locum Tenens Coverage		Yes
Rate	Multiple Discounts		Yes
Rate	New Practitioner Discount		Yes
Rate (revised)	Premium Payment Plan		Yes
Rate	Premium Payment Plan		Yes
Rate	Preceptee		Yes
Rate	Part-Time Discount		Yes
Rate	Residency Director Discount		Yes
Rate	Resident		Yes
Rate	Reinstatement Fee		Yes
Rate (revised)	Risk Management Discount		Yes
Rate	Risk Management Discount		Yes
Rate	Semi-Retired Discount		Yes
Rate	Schedule Rating Plan		Yes
Rate	Surgical/Nonsurgical		Yes
Rate	Policy Term		Yes
Rate	Veterans Administration Residency		Yes

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Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 01/26/2012
Submitted Date 01/27/2012
Respond By Date 02/09/2012

Dear Latasha Campbell,

This is to acknowledge receipt of your filing. Your submission is not acceptable for filing in Illinois due to the following reasons:

Unfortunately, without a unique number on each page, I will have to reference all of the section abbreviations.

1. Please indicate if your company has a plan for the gathering of statistics or the reporting of statistics to statistical agencies? If yes, what stat agency is being used?
2. Under PRM-ADC-CW, is there a set limit of liability for this coverage? If so, the page should indicate the amount.
3. Under PRM-ERP-IL, section 4 should consistently reference the "Optional" Extended Reporting Period. The extended reporting period (tail) coverage premium must be priced as a factor of one of the following: (1) the last twelve months premium; (2) the premium in effect at policy issuance; or (3) the expiring annual premium. The manual must list the factor to be used to figure the premium. The section under General Liability should reference that the Unlimited Extended Reporting Period premium is limited to a 200% cap of the annual premium of the expiring policy.
4. Under PRM-LL-CW, PRM-PRE-CW, and PRM-RES-CW, please provide the factors for the various limits listed.
5. Under PRM-LOA-CW, the insured is paying the premium during the leave of absence, although at a discount. The coverage was not cancelled - therefore, reinstatement, subject to the company's approval, should not apply.
6. Does the company utilize any deductible discounts?
7. How many policyholders have the non-surgical coverage? How many policyholders had the group discount before it was removed?

Sign up to get e-mail notification for updates to the Department's website. <http://insurance.illinois.gov/RSS/>

Please refer to the appropriate Property Casualty IS3 Review Requirements Checklist before submitting any filing. The checklists are available at the Department's Web site or at the following link:

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.htm

Please submit compliant form(s) no later than the date shown above or the entire filing may be disapproved. Please be

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advised that when the Director disapproves the form(s) you must immediately cease using the form(s) in Illinois.

Please give this matter your immediate attention. If you have any question regarding this filing please feel free to contact me.

Sincerely,
Gayle Neuman

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Response Letter

Response Letter Status	Submitted to State
Response Letter Date	02/08/2012
Submitted Date	02/09/2012

Dear Gayle Neuman,

Comments:

Please find our response to the departments questions from January 26, 2012.

Response 1

Comments: Question 1: We use ISO as our statistical agent.

Question 2: We have revised our Administrative Defense Coverage rule, PRM-ADC-IL Ed. 7-01-2-12 to reflect the limits of liability for this coverage.

Question 3: We have revised the language in our rule to consistently reference "Optional Extended Reporting Period Coverage."

Item 2 lists the factors for the expiring annual premium used in calculating the premium for this coverage.

There is no charge for the Unlimited Extending Report Period Coverage for General Liability. So, we did not include the language regarding the 200% cap.

Question 4: Here are the factors for our limits:

1. Standard Limits of Liability for PRM-LL-CW:

- | | |
|--|------------|
| A. \$ 100,000 Each Claim / \$ 300,000 Annual Aggregate | |
| B. \$ 200,000 Each Claim / \$ 600,000 Annual Aggregate | ILF = 1.2 |
| C. \$ 250,000 Each Claim / \$ 750,000 Annual Aggregate | ILF = 1.29 |
| D. \$ 500,000 Each Claim / \$1,000,000 Annual Aggregate | ILF = 1.4 |
| E. \$ 500,000 Each Claim / \$1,500,000 Annual Aggregate | ILF = 1.44 |
| F. \$1,000,000 Each Claim / \$1,000,000 Annual Aggregate | ILF = 1.55 |
| G. \$1,000,000 Each Claim / \$3,000,000 Annual Aggregate | ILF = 1.7 |

2. Factors for PRM-PRE-CW and PRM-RES-CW:

\$ 100,000 / \$ 300,000 \$ 950

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\$ 200,000 / \$ 600,000	\$1,000	ILF = 1.05263
\$ 250,000 / \$ 500,000	\$1,050	ILF = 1.105623
\$ 250,000 / \$ 750,000	\$1,080	ILF = 1.136842
\$ 500,000 / \$1,000,000	\$1,100	ILF = 1.15789
\$ 500,000 / \$1,500,000	\$1,100	ILF = 1.15789
\$1,000,000 / \$1,000,000	\$1,150	ILF = 1.210526
\$1,000,000 / \$3,000,000	\$1,200	ILF = 1.263158

Question 5: We have revised rule PRM-LOA-IL Ed. 7-01-2012 to remove the language regarding reinstatement.

Question 6: No

Question 7: We are not making any changes to our non-surgical coverage or removing the group discount. The 31% discount for nonsurgical coverage is reflected in our filed Illinois rate pages. The group discount can be found under our Schedule Rating Plan rule, PRM-SRP-IL, as Item 7.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing #
Administrative Defense Coverage	PRM-ADC-CW Ed. 7-01-2012	Replacement	
Previous Version			
Administrative Defense Coverage	PRM-ADC-CW Ed. 7-01-2012	Replacement	
Extended Reporting Period Coverage	PRM-ERP-IL Ed. 7-01-2012	Replacement	
Previous Version			

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Extended Reporting Period *PRM-ERP-IL Ed. 7-01-2012* *Replacement*
Coverage
Leave of Absence *PRM-LOA-IL Ed. 7-01-2012* *Replacement*
Previous Version
Leave of Absence *PRM-LOA-CW Ed. 7-01-2012* *Replacement*

Sincerely,
Jason Sokol, Latasha Campbell

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Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 01/06/2012
Submitted Date 01/06/2012
Respond By Date 01/13/2012

Dear Latasha Campbell,

This is to acknowledge receipt of your filing. Your submission is not acceptable for filing in Illinois due to the following reasons:

Does this filing replace all pages of filing IL-1555-P? The pages provided in this filing do not appear to include any rate pages.

Please indicate if your company has a plan for the gathering of statistics or the reporting of statistics to statistical agencies? If yes, what stat agency is being used?

215 ILCS 5/155.18 states it shall be certified in this filing by an officer of the company and a qualified actuary that the company's rates are based on sound actuarial principles and are not inconsistent with the company's experience. This information is required in every rate/rule filing for medical malpractice.

Sign up to get e-mail notification for updates to the Department's website. <http://insurance.illinois.gov/RSS/>

Please refer to the appropriate Property Casualty IS3 Review Requirements Checklist before submitting any filing. The checklists are available at the Department's Web site or at the following link:

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.htm

Please submit compliant form(s) no later than the date shown above or the entire filing may be disapproved. Please be advised that when the Director disapproves the form(s) you must immediately cease using the form(s) in Illinois.

Please give this matter your immediate attention. If you have any question regarding this filing please feel free to contact me.

Sincerely,
Gayle Neuman

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Response Letter

Response Letter Status Submitted to State
Response Letter Date 01/06/2012
Submitted Date 01/10/2012

Dear Gayle Neuman,

Comments:

Response 1

Comments: No, this filing will not replace Filing IL-1555-P. That was a rate filing. Our complete rules were last filed and approved on November 14, 2004 in a paper filing for our Podiatric Rating Manual Ed. 1-05. We also had a Illinois Rating Manual Supplement Ed. 1-08 approved under filing # IL-1002-P which was a SERFF Filing.

ISO is our Statistical Agent.

We have also attached a dual certification form.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Certification

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

We appreciate your continued review to our filing.

Sincerely,

Jason Sokol, Latasha Campbell

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Note To Reviewer

Created By:

Latasha Campbell on 06/28/2012 09:12 AM

Last Edited By:

Gayle Neuman

Submitted On:

06/28/2012 01:17 PM

Subject:

Effective Date

Comments:

Ms. Neuman,

We would like to change the effective date to October 1, 2012.

Thank you,

Latasha Campbell

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Note To Filer

Created By:

Gayle Neuman on 06/28/2012 07:57 AM

Last Edited By:

Gayle Neuman

Submitted On:

06/28/2012 01:17 PM

Subject:

effective date

Comments:

The Department of Insurance has now completed its review of this filing. Originally, you requested the filing be effective July 1, 2012. Do you still wish to have that effective date? Your prompt response is appreciated.

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Note To Filer

Created By:

Gayle Neuman on 06/22/2012 08:15 AM

Last Edited By:

Gayle Neuman

Submitted On:

06/28/2012 01:17 PM

Subject:

status

Comments:

Our Legal Division is still reviewing the filing.

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Note To Reviewer

Created By:

Latasha Campbell on 06/21/2012 03:41 PM

Last Edited By:

Gayle Neuman

Submitted On:

06/28/2012 01:17 PM

Subject:

Filing Status

Comments:

Ms. Neuman,

I was checking on the status of our filing. The last update was that it was still in review by the department's legal division.

Thank you,

Latasha Campbell

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Note To Filer

Created By:

Gayle Neuman on 05/15/2012 09:51 AM

Last Edited By:

Gayle Neuman

Submitted On:

06/28/2012 01:17 PM

Subject:

pending

Comments:

Filing is still in the routing process through our Legal Department and the Director.

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Note To Reviewer

Created By:

Latasha Campbell on 05/14/2012 04:26 PM

Last Edited By:

Gayle Neuman

Submitted On:

06/28/2012 01:17 PM

Subject:

Filing status

Comments:

Ms. Neuman,

I wanted to inquire about our filing. The outside actuary had one question and it was addressed.

Thank you,

Latasha

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<i>Project Name/Number:</i>	<i>2012 Podiatry Rules/IL-1757-P</i>		

Amendment Letter

Submitted Date: 04/18/2012

Comments:

In response to a letter received from the consulting actuary, Robert Walling, we have attached a revised copy of our Risk Management Discount which does not contain any ranges.

Thank you,

Latasha Campbell

Changed Items:

Rate/Rule Schedule Item Changes:

Exhibit Name:	Rule # or Page #:	Rate Action:	Previous State Filing Number:	Attach Document:
Risk Management Discount	PRM-RMD-LIM Ed. 7- 01-2012	Replacement		PRM-RMD-LIM Ed. 7- 01-2012.pdf

<i>SERFF Tracking Number:</i>	<i>PCAG-127904582</i>	<i>State:</i>	<i>Illinois</i>
<i>Filing Company:</i>	<i>Podiatry Insurance Company of America</i>	<i>State Tracking Number:</i>	<i>PCAG-127904582</i>
<i>Company Tracking Number:</i>	<i>IL-1757-P</i>		
<i>TOI:</i>	<i>11.2 Med Mal-Claims Made Only</i>	<i>Sub-TOI:</i>	<i>11.2025 Podiatry</i>
<i>Product Name:</i>	<i>Podiatrists Professional Liability Program</i>		
<i>Project Name/Number:</i>	<i>2012 Podiatry Rules/IL-1757-P</i>		

Note To Filer

Created By:

Gayle Neuman on 03/13/2012 09:00 AM

Last Edited By:

Gayle Neuman

Submitted On:

06/28/2012 01:17 PM

Subject:

status

Comments:

The filing is being reviewed by the Actuarial Unit - including review by an outside actuary. Then the filing is reviewed by our Legal Division and the Director. I would guess it will take at least another month.

SERFF Tracking Number: *PCAG-127904582* *State:* *Illinois*
Filing Company: *Podiatry Insurance Company of America* *State Tracking Number:* *PCAG-127904582*
Company Tracking Number: *IL-1757-P*
TOI: *11.2 Med Mal-Claims Made Only* *Sub-TOI:* *11.2025 Podiatry*
Product Name: *Podiatrists Professional Liability Program*
Project Name/Number: *2012 Podiatry Rules/IL-1757-P*

Note To Reviewer

Created By:

Latasha Campbell on 03/13/2012 08:37 AM

Last Edited By:

Gayle Neuman

Submitted On:

06/28/2012 01:17 PM

Subject:

Filing Status

Comments:

Ms. Neuman,

I wanted to inquire on how much longer it may take the department to complete its review of our filing.

Thank you,

Latasha Campbell

SERFF Tracking Number: PCAG-127904582 State: Illinois
Filing Company: Podiatry Insurance Company of America State Tracking Number: PCAG-127904582
Company Tracking Number: IL-1757-P
TOI: 11.2 Med Mal-Claims Made Only Sub-TOI: 11.2025 Podiatry
Product Name: Podiatrists Professional Liability Program
Project Name/Number: 2012 Podiatry Rules/IL-1757-P

Amendment Letter

Submitted Date: 12/27/2011

Comments:

Under the 10 payment plan, the following wording "Ten equal payments of 10%" was removed. It was left on rule PRM-PPP-IL Ed. 7-01-2012 in error.

Changed Items:

Rate/Rule Schedule Item Changes:

Exhibit Name:	Rule # or Page #:	Rate Action:	Previous State Filing Number:	Attach Document:
Premium Payment Plan	PRM-PPP-IL Ed. 7-01-2012	Replacement		PRM-PPP-IL Ed. 7-01-2012.pdf

Rate/Rule Schedule

Schedule Item Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Number:	Attachments
	Administrative Defense Coverage	PRM-ADC-CW Ed. 7-01-2012	Replacement		PRM-ADC-IL Ed. 7-01-2012.pdf
	Ambulatory Surgical Center	PRM-ASC-CW Ed. 7-01-2012	Replacement		PRM-ASC-CW Ed. 7-01-2012.pdf
	Business Premises Liability & Personal Injury Liability Coverage	PRM-BP/PI-CW Ed. 7-01-2012	Replacement		PRM-BPPI-CW Ed. 7-01-2012.pdf
	Claims-Free Discount	PRM-CFD-CW Ed. 7-01-2012	New		PRM-CFD-CW Ed. 7-01-2012.pdf
	Corporations	PRM-CORP-CW Ed. 7-01-2012	Replacement		PRM-CORP-CW Ed. 7-01-2012.pdf

SERFF Tracking Number:	PCAG-127904582	State:	Illinois
Filing Company:	Podiatry Insurance Company of America	State Tracking Number:	PCAG-127904582
Company Tracking Number:	IL-1757-P		
TOI:	11.2 Med Mal-Claims Made Only	Sub-TOI:	11.2025 Podiatry
Product Name:	Podiatrists Professional Liability Program		
Project Name/Number:	2012 Podiatry Rules/IL-1757-P		

Employed Podiatrist Discount	PRM-EMP-CW Ed. 7-01-2012	Replacement	PRM-EMP-CW Ed. 7-01-2012.pdf
Extended Reporting Period Coverage	PRM-ERP-IL Ed. 7-01-2012	Replacement	PRM-ERP-IL Ed. 7-01-2012.pdf
Limits of Liability	PRM-LL-CW Ed. 7-01-2012	Replacement	PRM-LL-CW Ed. 7-01-2012.pdf
Leave of Absence	PRM-LOA-IL Ed. 7-01-2012	Replacement	PRM-LOA-IL Ed. 7-01-2012.pdf
Locum Tenens Coverage	PRM-LTC-CW Ed. 7-01-2012	Replacement	PRM-LTC-CW d. 7-01-2012.pdf
Multiple Discounts	PRM-MLT-CW Ed. 7-01-2012	Replacement	PRM-MLT-CW Ed. 7-01-2012.pdf
New Practitioner Discount	PRM-NPD-CW Ed. 7-01-2012	Replacement	PRM-NPD-CW Ed. 7-01-2012.pdf
Premium Payment Plan	PRM-PPP-IL Ed. 7-01-2012	Replacement	PRM-PPP-IL Ed. 7-01-2012.pdf
Preceptee	PRM-PRE-CW Ed. 7-01-2012	Replacement	PRM-PRE-CW Ed. 7-01-2012.pdf
Part-Time Discount	PRM-PTD-CW Ed. 7-01-2012	Replacement	PRM-PTD-CW Ed. 7-01-2012.pdf
Residency Director	PRM-RDD-CW	Replacement	PRM-RDD-CW Ed. 7-

SERFF Tracking Number: PCAG-127904582 State: Illinois
 Filing Company: Podiatry Insurance Company of America State Tracking Number: PCAG-127904582
 Company Tracking Number: IL-1757-P
 TOI: 11.2 Med Mal-Claims Made Only Sub-TOI: 11.2025 Podiatry
 Product Name: Podiatrists Professional Liability Program
 Project Name/Number: 2012 Podiatry Rules/IL-1757-P

Discount	Ed. 7-01-2012		01-2012.pdf
Resident	PRM-RES-CW Ed. 7-01-2012	Replacement	PRM-RES-CW Ed. 7-01-2012.pdf
Reinstatement Fee	PRM-RF-CW Ed. 7-01-2012	Replacement	PRM-RF-CW Ed. 7-01-2012.pdf
Risk Management Discount	PRM-RMD-LIM Ed. 7-01-2012	Replacement	PRM-RMD-LIM Ed. 7-01-2012.pdf
Semi-Retired Discount	PRM-SRD-CW Ed. 7-01-2012	Replacement	PRM-SRD-CW Ed. 7-01-2012.pdf
Schedule Rating Plan	PRM-SRP-IL Ed. 7-01-2012	Replacement	PRM-SRP-IL Ed. 7-01-2012.pdf
Surgical/Nonsurgical	PRM-SURG-CW Ed. 7-01-2012	Replacement	PRM-SURG-CW Ed. 7-01-2012.pdf
Policy Term	PRM-TRM-CW Ed. 7-01-2012	Replacement	PRM-TRM-CW Ed. 7-01-2012.pdf
Veterans Administration Residency	PRM-VAR-CW Ed. 7-01-2012	Replacement	PRM-VAR-CW Ed. 7-01-2012.pdf

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Administrative Defense Coverage

1. The Administrative Defense Endorsement covers medical licensing board actions, hospital medical staff peer review actions, managed care decertification actions and Medicaid/Medicare (and other payor) billing and coding errors and omissions.
2. Included in the current premium, this coverage will be attached by endorsement to all podiatric policies.
3. Coverage limits:
 - a. Administrative Disciplinary Proceedings - \$25,000 per insured event
 - b. Practice Interruption Expense - \$500 per day

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Ambulatory Surgical Center

Coverage is provided with the following criteria:

1. A majority of the owners must be insured with PICA.
2. Standard coverage limits are \$1,000,000/3,000,000.
3. Premium will be based on the mature rate for the coverage limits selected, multiplied by the total number of podiatric physicians (with the exception of PICA insured podiatric residents), multiplied by 5%.
4. Coverage is provided for the ambulatory surgical center based upon the total number of PICA insured owners, non-PICA insured owners and all non-owner podiatric physician users.

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Business Premises Liability and Personal Injury Liability Coverage

This is an optional coverage that responds to Business Premises Liability and Personal Injury Liability on behalf of the Insured.

Coverage Limits

1. Medical Payments - \$250 per claim/\$250 aggregate
2. Property Damage - \$5,000 per claim/\$5,000 aggregate
3. Personal Injury Liability - \$100,000 per claim/\$100,000 aggregate
4. Bodily Injury Liability - Same limits of liability as selected for the professional liability coverage.
5. Standard limits and annual premiums are indicated below. Some limits may not be available in all states. Refer to Company for additional limit options.

<u>Bodily Injury</u>	<u>One Location</u>	<u>Two or More Locations</u>
\$100,000/300,000	\$30.00	\$50.00
\$200,000/600,000	\$36.00	\$60.00
\$250,000/750,000	\$39.00	\$65.00
\$500,000/1,000,000	\$42.00	\$70.00
\$500,000/1,500,000	\$43.00	\$72.00
\$1,000,000/1,000,000	\$47.00	\$78.00
\$1,000,000/3,000,000	\$51.00	\$85.00

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Claims-Free Discount

1. One of the following discounts shall be applied to all eligible policyholders:
 - i. Five (5) years claims-free = 5% Discount
 - ii. Ten (10) years claims-free = 10% Discount
2. To be considered claims-free, the policyholder must have no claims within the requisite time period that involve a professional liability indemnity payment.

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Corporations

All owners of the Professional Corporation (PC), Professional Association (PA) or Limited Liability Corporation (LLC) must be Podiatrists, insured with PICA, maintain the same Limits of Liability, and agree to the same option.

Shared Limit of Liability

1. Shared Limits of Liability are available (where permitted by state regulations).
2. There is no additional premium for “shared” Limits of Liability.

Separate Limit of Liability

1. Separate Limits of Liability are available for an additional 5% of the total premium charged to each insured in the corporation or partnership.
2. The maximum charge is 100% of the mature premium for the corresponding Limit of Liability and the minimum is 5% of the professional liability premium being charged.

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Employed Podiatrist Discount

25% Discount for Employed Podiatrist

1. An employed podiatrist works 100% for an employer without ownership interest in the corporation, professional association or partnership.
2. An employed podiatrist is paid a set salary
3. An employed podiatrist's salary does not include commissions, bonuses, or any other type of incentive payments.
4. An employed podiatrist's salary is not based on a percentage of income or the number of patients treated.

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Extended Reporting Period Coverage (Optional Extension Coverage) Illinois

Malpractice Liability

1. In the event of termination of this insurance by reason of non-renewal or cancellation by the Insured or if the Company shall cancel this policy or terminate it by refusing to renew for any reason, the Insured shall have the right to an Automatic Extended Reporting Period or an Optional Extended Reporting Period as follows:

- A. Automatic Extended Reporting Period

Upon termination of coverage, a 30-day Automatic Extended Reporting Period will be provided by the Company. The aggregate liability limit for this Automatic Extended Reporting Period shall be equal to the amount of coverage remaining in the policy's annual aggregate liability limit.

- B. Optional Extended Reporting Period

Upon payment of an additional premium calculated as described below, the Insured shall have the option to extend the claims reporting period for a period of unlimited duration, subject otherwise to the policy's terms, exclusions and conditions, to apply to claims first made against the insured and reported to the Company in writing following the effective date of such termination, but only by reason of malpractice which happened on or after the Retroactive Date and prior to the effective date of such termination, and which is otherwise covered by this insurance. This extended claims reporting period is referred to in the policy as the **OPTIONAL EXTENSION COVERAGE**.

If the Insured purchases this Optional Extended Reporting Period Coverage, it will replace the automatic Extended Reporting Period that is provided by the Company. The aggregate liability limit for this Optional Extended Reporting Period Coverage shall be equal to the amount of coverage remaining in the policy's annual aggregate liability limit.

- 2. The premium for the Optional Extended Reporting Period Coverage shall be the product of the applicable percentage factor in the following Table and the expiring annual premium of the policy.

Years of Prior PICA
Claims-Made Coverage

Percentage of 4th Year
Claims-Made Premium

One	100%
Two	155%
Three	175%
Four or More	180%

3. The number of consecutive years of prior claims-made coverage shall be determined as of the date the Optional Extended Reporting Period Coverage is purchased.
4. The availability of Optional Extended Reporting Period coverage shall be governed by the following rules:
 - A. Available Limits of Liability shall not exceed those afforded under the current claims-made policy.
 - B. Optional Extended Reporting Period Coverage applies to claims first made against the insured immediately following the effective date of cancellation or non-renewal; but only by reason of alleged malpractice which occurred on or after the retroactive date and prior to the effective date of cancellation or non-renewal (and which is otherwise covered by this insurance) for a period of unlimited duration.
 - C. Optional Extended Reporting Period Coverage is granted at no charge in the event of death or permanent disability or in the event of permanent retirement at any age after five (5) years of continuous coverage. Permanent disability is defined as having existed continuously for not less than six (6) months, having rendered the Insured unable or incapable of practicing or continuing to practice, and expected to be continuous and permanent.
 - D. Optional Extended Reporting Period Coverage provided at no charge for retirement is a one-time benefit.
 - E. The insured may purchase Optional Extended Reporting Period Coverage. The insured is eligible for this coverage provided:
 - a. The insured requests Optional Extended Reporting Period Coverage within thirty (30) days of the effective date of policy termination; and
 - b. Any outstanding premium with respect to the terminated policy is paid.
 - F. An insured who retires from practice will receive a discount from the applicable Optional Extended Reporting Period Coverage premium for each consecutive year with PICA, excluding any period the insured was on Leave of Absence. These discounts are reflected in the following Table.

<u>Consecutive Years with PICA</u>	<u>Discount Applicable To Extended Reporting Period Coverage Premium</u>
1	20%
2	40%
3	60%
4	80%
5	100%

- G. Consideration may be given to new applicants to allow credit for consecutive years of coverage with another carrier subject to underwriting approval.
- H. Optional Extended Reporting Period Coverage premium will be waived for policyholders who have been insured by PICA for ten (10) years and enter full time academia.
- I. The Company shall inform the Insured of the Optional Extended Reporting Period Coverage (ERP) premium at the time the last policy is purchased. The Company may not wait until the Insured requests to purchase the ERP to tell the Insured what the premium will be or how the premium would be calculated.
- J. The following discounts: Employed Podiatrist, New Practitioner, Part Time, Semi-Retired and Residency Director shall, if applicable, be applied when determining the final extended reporting period premium.

The following discounts: Leave of Absence and Risk Management shall not be applied when determining the final extended reporting period premium.

- K. The Company will offer the Optional Extended Reporting Period Coverage when the policy is terminated for any reason, including non-payment of premium, and whether the policy is terminated at the company's or insured's request.

General Liability

- 1. In the event of the termination of this insurance by reason of non-renewal or cancellation by the Insured or if the Company shall cancel this policy or terminate it by refusing to renew for any reason, the insured shall have the right to an automatic Extended Reporting Period or an Optional Extended Reporting Period as follows:

- A. Automatic Extended Reporting Period

Upon termination of coverage, a 60-day automatic Extended Reporting Period will be provided by the Company. The aggregate liability limit for this automatic Extended Reporting Period shall be equal to the amount of coverage remaining in the policy's annual aggregate liability limit.

B. Optional Extended Reporting Period

The Insured shall have the option to extend the claims reporting period, subject otherwise to the policy's terms, exclusions and conditions, to apply to claims first made against the insured and reported to the Company in writing following the effective date of such termination, but only by reason of Business Premises Liability, Office Premises Medical Payments or Personal Injury Liability which happened on or after the Retroactive Date and prior to the effective date of such termination, and which is otherwise covered by this insurance. This extended claims reporting period is referred to in this policy as the OPTIONAL EXTENSION COVERAGE.

Two Optional Extended Reporting Period options are available:

- 1) Unlimited Extended Reporting Period - For General Liability, there is no additional premium charge for an unlimited reporting period under the Optional Extended Reporting Period Coverage. Under the option of an unlimited extended reporting period, 100% of the aggregate liability limit of the current claims-made policy shall be reinstated for the duration of the extended reporting period.
- 2) Five-Year Extended Reporting Period - For General Liability, if the insured does not choose the free unlimited reporting period coverage, the insured will be provided a free five-year extended reporting period after the free 60-day Automatic Extended Reporting Period. Under the option of a free five-year extended reporting period, the aggregate liability limit shall be equal to the amount of coverage remaining in the policy's annual aggregate liability limit at termination.

If the Insured selects an Optional Extended Reporting Period, it will replace the Automatic Extended Reporting Period that is provided by the Company.

2. The insured is eligible for the Optional Extended Reporting Period coverage provided:
 - a. The insured requests Optional Extended Reporting Period Coverage within sixty (60) days of the effective date of termination; and
 - b. any outstanding premium with respect to the terminated policy is paid
3. The Company will offer the Optional Extended Reporting Period Coverage when the policy is terminated for any reason, including non-payment of premium, and whether the policy is terminated at the company's or insured's request.

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Limits of Liability

1. Standard, available Limits of Liability include:
 - A. \$ 100,000 Each Claim / \$ 300,000 Annual Aggregate
 - B. \$ 200,000 Each Claim / \$ 600,000 Annual Aggregate
 - C. \$ 250,000 Each Claim / \$ 750,000 Annual Aggregate
 - D. \$ 500,000 Each Claim / \$1,000,000 Annual Aggregate
 - E. \$ 500,000 Each Claim / \$1,500,000 Annual Aggregate
 - F. \$1,000,000 Each Claim / \$1,000,000 Annual Aggregate
 - G. \$1,000,000 Each Claim / \$3,000,000 Annual Aggregate
2. Refer to Company for additional Limit of Liability options.
3. Requests for higher limits of liability must be approved by the Vice President of Underwriting.

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Leave of Absence

1. The Leave of Absence endorsement interrupts the premium and policy due to the insured's temporary cessation of practice for a minimum of 30 days, not to exceed 12 consecutive months, in special circumstances. These circumstances include, but are not limited to, illness, childbirth, sabbatical leave, additional training, humanitarian projects, military assignments, absences pursuant to the Family and Medical Leave Act, and other situations as approved by the Underwriting Department.
2. A premium rate of 25% of the practitioner's current premium calculated on a pro rata basis will apply.

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Locum Tenens Coverage

Locum Tenens coverage will be available at no charge for periods of up to sixty days within any policy year, subject to underwriting approval of the replacement podiatric physician.

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Multiple Discounts

The practitioner will receive the greater of the classification discounts (Part-time, Semi-Retired, Employed, New Practitioner) that would apply.

For example an insured would receive a 50% semi-retired discount and not a 25% employed podiatrist discount.

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New Practitioner Discount

75% Discount	First-Year New Practitioner
50% Discount	Second Year New Practitioner
35% Discount	Third Year New Practitioner
20% Discount	Fourth Year New Practitioner

1. No finance charge/installment fee will be applied to the first, second, third or fourth year.
2. This discount applies to recent podiatric medical school and/or residency graduates, practitioners who have completed a preceptorship, practitioners who have completed three years of service in one of the Armed Forces or other government programs.
3. A first-year new practitioner who has completed an American Podiatric Medical Association Council on Podiatric Medical Education (CPME) approved residency program or a program that is in candidate status will be provided with retroactive coverage at no additional charge if it is not available from the prior carrier. The practitioner must submit verification of prior claims-made insurance coverage with no lapse.
4. The new practitioner discount will be allowed for applicants requesting retroactive coverage up to four years in practice.

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Premium Payment Plan - Illinois

The following payment options are available:

1. Payment in full – No additional fees/charges.
2. Two Payment Plan – No additional fees/charges.
3. Five Payment Plan – First installment of 25% due (as a down payment) when the policy is issued/renewed. Four remaining installments due every other month. Finance charge (9.5% APR) applies to all policyholders except new practitioners, residents and preceptees.
4. Ten Payment Plan – First installment of 15% due (as a down payment) when the policy is issued/renewed. Nine remaining payments due each month. Finance charge (9.5% APR) applies to all policyholders except new practitioners, residents and preceptees.
5. Quarterly Installment Plan – Four equal payments of 25%. Installment fee of \$25 or 1% of the total annual premium, whichever is less. First installment due (as a down payment) when the policy is issued/renewed. Three remaining installments due 3, 6 and 9 months from policy inception. The Company shall not apply interest charges.

In the event that an insured makes a payment after the due date, a flat late fee of \$10.00 will be charged.

Additional premium due as the result of a policy change will be spread over the remaining installments, if any. If there are no remaining installments, additional premium due will be billed immediately as a separate transaction.

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Preceptee

<u>Limits of Liability</u>	<u>Annual Premium (Includes ERP)</u>
\$ 100,000 / \$ 300,000	\$ 950
\$ 200,000 / \$ 600,000	\$1,000
\$ 250,000 / \$ 500,000	\$1,050
\$ 250,000 / \$ 750,000	\$1,080
\$ 500,000 / \$1,000,000	\$1,100
\$ 500,000 / \$1,500,000	\$1,100
\$1,000,000 / \$1,000,000	\$1,150
\$1,000,000 / \$3,000,000	\$1,200

1. Coverage is available for podiatric college graduates or residents entering preceptorship (apprenticeship/training) programs conducted by preceptors who are PICA policyholders.
2. The preceptorship program must last for one year.
3. Both preceptee and preceptor must sign the Preceptorship Certificate
4. Preceptor must be insured by PICA.
5. Extended Reporting Period (ERP) Coverage is issued concurrently with the policy and earned completely on the first day of the policy.
6. Financial responsibility is with the named insured.

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Part Time Discount

25% Discount	11-20 patient contact hours per week
50% Discount	1-10 patient contact hours per week

The Part Time Discount will apply to surgical and non-surgical policyholders.

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Residency Director Discount

25% Discount

Residency Director appointed by the Council of Podiatric Medical Education

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Resident

<u>Limits of Liability</u>	<u>Annual Premium (Includes ERP)</u>
\$ 100,000 / \$ 300,000	\$ 950
\$ 200,000 / \$ 600,000	\$1,000
\$ 250,000 / \$ 500,000	\$1,050
\$ 250,000 / \$ 750,000	\$1,080
\$ 500,000 / \$1,000,000	\$1,100
\$ 500,000 / \$1,500,000	\$1,100
\$1,000,000 / \$1,000,000	\$1,150
\$1,000,000 / \$3,000,000	\$1,200

1. Coverage is available for residents in an American Podiatric Medical Association Council on Podiatric Medical Education approved program or a program in candidate status.
2. Extended Reporting Period (ERP) Coverage is issued concurrently with the policy and earned completely on the first day of the policy.
3. Financial responsibility is with the named insured.
4. Coverage is only for responsibilities as a part of the residency program.

Moonlighting

1. Coverage requested for moonlighting must be approved by the Residency Director.
2. If approved by the Residency Director, a new practitioner policy will be issued with the proper classification (sole practitioner or employed podiatrist).
3. The resident must weigh the benefit of moonlighting since the new practitioner policy does not include Extended Reporting Period coverage.
4. The next year will be rated under the second year premium.

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Reinstatement Fee

\$50 Reinstatement Fee

1. A policy which has been cancelled due to non-payment of premium will not be reinstated unless the total amount of outstanding premium is received. If payment is received after the effective date of cancellation, the policy may be reinstated, subject to satisfactory underwriting review, and will be charged a \$50 reinstatement fee.

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Risk Management Discount

10% Discount	For completion of a Home Study Course or attendance at a PICA/ Podiatry Institute Meeting.
5% Discount	For attendance at a certified risk management seminar of two to five hours.
10% Discount	For attendance at a certified, dedicated risk management seminar in excess of five hours.
10% Discount	For new applicants who have completed a risk management program which would have qualified for a risk management discount with their previous carrier.
15%	Maximum Risk Management Discount available under this rating rule.

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Semi-Retired Discount

50% Semi-Retired Discount

1. To qualify for the Semi-Retired Discount, the insured:
 - a. Must be at least 55 years of age;
 - b. Must have been insured with PICA for at least five years immediately prior to becoming semi-retired;
 - c. Must have not more than 20 patient contact hours per week.
2. Consideration may be given to new applicants to allow credit for consecutive years of coverage with another carrier, subject to underwriting approval.

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Schedule Rating Plan – Illinois

As the company becomes aware of variability in risk characteristics presented by an insured or group who, in the opinion of the company, uniquely qualify for premium modifications because of factors not contemplated in the filed rate structure of the company, the following schedule of modifications shall be used to determine the appropriate premium.

The premium for a risk may be modified in accordance with the following, subject to a maximum modification of -25% / +25%, to recognize risk characteristics that are not reflected in the otherwise applicable premium. All modifications applied under this Schedule Rating Plan are subject to periodic review.

The modification shall be based on one or more of the following considerations:

1. Historical Loss Experience: The frequency or severity of claims for the insured is greater/less than the expected experience for an insured of the same classifications/size or recognition of unusual circumstances of claims in the loss experience.
2. Cumulative Years of Patient Experience: The insured demonstrates a greater/less than stable, longstanding practice and/or significant degree of experience in their current area of medicine.
3. Classification Anomalies: Characteristics of a particular insured that differentiate the insured to be greater/less than from other members of the same class, or recognition of recent developments within a classification or jurisdiction that are anticipated to impact future loss experience.
4. Claim Anomalies: Economic, societal, or jurisdictional charges or trends that will positively or negatively influence the frequency or severity of claims or the unusual circumstances of a claim which understate/overstate the severity of the claim.
5. Management Control Procedures: Specific operational activities (or lack thereof) undertaken by the insured to reduce the frequency and/or severity of claims.
6. Number/Type of Patient Exposures: Size and/or demographics of the patient population which negatively or positively influences the frequency and/or severity of claims.

7. Organizational Size/Structure: A group's size, processes, and/or roster of insureds are such that the company will incur greater or lesser costs in association with its service to, or coverage of, the group.
8. Healthcare Standards, Quality, and Claims Review: Presence (or lack) of (1) committees that meet on a routine basis to review healthcare procedures, treatments, and protocols, and then assist in the integration of such into the practice; (2) committees that meet to assure the quality of the healthcare services being rendered; and/or, (3) committees to provide consistent review of claims/incidents that have occurred and to develop corrective action.
9. Other Risk Management Practices and Procedures: Additional activities (or lack thereof) undertaken with the specific intention of reducing the frequency and severity of claims.
10. Training, Accreditation, and Credentialing: The insured exhibits greater/less than normal participation and support of such activities.
11. Record Keeping Practices: Degree to which the insured incorporates methods to maintain quality patient records, referrals, and test results.
12. Utilization of Monitoring Equipment, Diagnostic Tests, or Procedures: Demonstrating the willingness (or lack thereof) to expend the time and capital to incorporate the latest advances in medical treatments and equipment into the practice, providing above or below average procedures as defined in the underwriting guidelines for a specialty, or failure to meet accepted standards of care.

The aforementioned modifications contemplate the standard allowance for expenses and are subject to the maximum modification referenced above. If the expenses are less than standard, an additional modification may be made to reflect this reduction.

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Surgical/Nonsurgical

31.3% Discount for Nonsurgical Coverage

Surgery Definition

Except as noted below, surgery shall include any procedure requiring an anesthetic, with or without post-operative treatment.

Exceptions to the above include diagnostic and therapeutic injections, surgical procedures involving the nails, excision of skin lesions (with the exception of skin grafts), incision and drainage of abscesses and the treatment of ulcers that do not involve bone.

Post operative treatment will be covered under a non-surgical policy if and only if the podiatric physician performing the surgery maintains a surgical policy with PICA.

A podiatric physician acting as an assistant surgeon will not be covered under a non-surgical policy.

Prior Surgery Covered

For a podiatric physician requesting a change from surgical to non-surgical coverage with prior surgeries covered, the premium will be calculated by averaging the sum of the applicable surgical and non-surgical premium. Subsequent renewal premium will be based on the non-surgical premium.

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Policy Term

The standard policy term is twelve consecutive months.

On exception, a short term policy may be issued on a pro-rata basis and then renewed for an annual term thereafter, or a policy may be extended for a short term.

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Veterans Administration Residency

1. This is a modification of the existing resident policy, allowing more than one resident to be covered under one policy.
2. The policy will cover residents during rotations outside of the Veterans Administration facility, not to exceed 261 days per premium charged.
3. Outside rotations must be an integral part of the residency program.
4. Individuals must be "Scheduled" on the policy with the Extended Reporting Period endorsement being issued upon receipt of the final audit from the residency program. This ensures proper documentation of outside rotations as well as appropriate premium charges.
5. Financial responsibility of this policy is contracted by signature with the residency director on the "Schedule."
6. Risk management discounts will not be allowed on this policy, but will be allowed when the resident renews as a new practitioner.

SERFF Tracking Number:	PCAG-127904582	State:	Illinois
Filing Company:	Podiatry Insurance Company of America	State Tracking Number:	PCAG-127904582
Company Tracking Number:	IL-1757-P		
TOI:	11.2 Med Mal-Claims Made Only	Sub-TOI:	11.2025 Podiatry
Product Name:	Podiatrists Professional Liability Program		
Project Name/Number:	2012 Podiatry Rules/IL-1757-P		

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Explanatory Memorandum Comments: Our statistical agent is ISO. Attachment: IL Pod Rating Manual Explanatory.pdf		
Bypassed - Item: Form RF3 - (Summary Sheet) Bypass Reason: rule filing. Comments:		
Satisfied - Item: Certification Comments: Attachment: Dual CERTIFICATION.doc.pdf		
Bypassed - Item: Manual Bypass Reason: Entire manual is being revised and is attached to the rate/rule schedule. Comments:		

EXPLANATORY MEMORANDUM
Podiatry Insurance Company of America
Podiatrists Professional Liability Program

Amendatory Rule Filing – State of Illinois

With this filing we are submitting for your approval a newly-formatted rating manual for the company's Podiatrists Professional Liability program.

The new format introduces a separate page/section for each rating rule. Rules identified as "CW" (countrywide) apply in most, if not all, states. Rules identified as "LIM" (limited) apply in more than one state. Rules identified by a two-letter state postal code are specific to that state, and have been amended to meet state requirements.

In most cases, verbiage was modified primarily to make the rule more clear, concise and consistent, to provide clarification, and/or to correspond with a filed policy form. A description of principal changes to each rule follows.

The proposed effective date for this filing is July 1, 2012.

This filing will replace the following:

Podiatric Rating Manual, Ed. 1-05
Rating Manual Supplement – Company Name Change
Rating Manual Supplement - Ambulatory Surgery Centers
Illinois State Supplement, Ed. 1-08

PRM-ADC-CW Ed. 7-01-2012 - Administrative Defense Coverage
Removed the charge for Residents, Preceptees and New Practitioners.

PRM-ASC-CW Ed. 7-01-2012 - Ambulatory Surgical Center
Replaces previously-filed Ambulatory Surgical Centers Supplement.
Coverage limits of \$1M/\$3M are now "standard," rather than "mandatory," and we clarified that the premium is based on the mature rate for the coverage limits selected, rather than the mature rate for \$1M/\$3M coverage.
Removed items which were not related to rating of the coverage from the rate page.

PRM-BP/PI-CW Ed. 7-01-2012- Business Premises Liability and Personal Injury Liability Coverage
Changed title from "General Liability Coverage."
Clarified the per claim/aggregate coverage limits.
Included standard Limits of Liability and Premiums consistent with those offered on the Business Premises Liability and Personal Injury Liability Coverage Application (form PICA-2002-GLSupp Ed. 4-11).

PRM-CFD-CW Ed. 7-01-2012 - Claims-Free Discount
Our Claims-Free Discount Rule has been previously approved. It is just being refilled under the new format changes of our rating manual. There were only formatting changes to this rule.

PRM-CORP-CW Ed. 7-01-2012 - Corporations

Changed Rule title from "Partnership, Corporation or Professional Association."

Consistent with verbiage on the Insurance Application, clarified that all owners of the Professional Corporation (PC), Professional Association (PA) or Limited Liability Corporation (LLC) must be Podiatrists, insured with PICA, maintain the same Limits of Liability, and agree to the same option.

Clarified that shared limits of liability are available only where permitted by state regulations.

PRM-EMP-CW Ed. 7-01-2012 - Employed Podiatrist Discount

No changes to the 25% discount.

Incorporated guidelines from the "Employed Podiatrist Verification Supplement" (form PICA-2020 Ed. 4-11).

PRM-ERP-IL Ed. 7-01-2012 - Extended Reporting Period Coverage

Incorporated explanation that the period an insured is on leave of absence does not accrue toward discounted/no charge ERP.

Added statement that extended reporting period coverage provided at no charge for retirement is a one-time benefit.

Removed statement that credit on a two-for-one basis to bridge prior PICA coverage may be granted toward the retirement tail coverage.

PRM-LL-CW Ed. 7-01-2012 - Limits of Liability

Included standard Limits of Liability options which correspond with filed rate pages.

Removed statement that higher limits of liability require reinsurer approval.

PRM-LOA-CW Ed. 7-01-2012 - Leave of Absence

Added the period of time (minimum of 30 days, not to exceed 12 consecutive months) applicable to the Leave.

Added, per endorsement wording, that reinstatement will be made upon the insured's return to practice, subject to the company's approval.

Incorporated additional standard "permissible circumstances" which would qualify for a leave of absence.

PRM-LTC-CW Ed. 7-01-2012 - Locum Tenens Coverage

There are no substantive changes to the provisions.

PRM-MLT-CW Ed. 7-01-2012 - Multiple Discounts

Identified "Classification" discounts.

PRM-NPD-CW Ed. 7-01-2012 - New Practitioner Discount

Clarified parameters applicable to retroactive coverage for new practitioners who were insured with another carrier during an APMA CPME residency. Retroactive coverage at no additional charge is provided only to first-year practitioners, and only if coverage is not available from the prior carrier.

PRM-PPP-IL Ed. 7-01-2012 - Premium Payment Plan

Added options for payment in full and two-payment plan, neither of which includes any additional fees or charges.

PRM-PRE-CW Ed. 7-01-2012 - Preceptee

Incorporated standard Limits of Liability and Annual Premiums which were not previously included in the manual. Amended reference to "Optional Extension Coverage" to "Extended Reporting Period Coverage."

PRM-PTD-CW Ed. 7-01-2012 - Part-Time Discount

Reference changed from "practice hours" to "patient contact hours," consistent with Part-Time Verification Application Supplement, form PICA-2015 Ed. 4-11.

PRM-RDD-CW Ed. 7-01-2012 - Residency Director Discount

There are no substantive changes to the provisions.

PRM-RES-CW Ed. 7-01-2012 - Resident

Incorporated standard Limits of Liability and Annual Premiums, as provided on the Application for Podiatric Resident Professional Liability Insurance, form PICA-2005 Ed. 4-11. Amended reference to "Optional Extension Coverage" to "Extended Reporting Period Coverage. Removed statement, "Documentation is critical for the underwriting file."

PRM-RF-CW Ed. 7-01-2012 - Reinstatement Fee

There is no change to the previously-approved reinstatement fee.

PRM-RMD-CW Ed. 7-01-2012 - Risk Management Discount

Removed "as determined by the risk management committee" from meeting qualification and discount level, as the determination may be contractually negotiated between the company and a state association.

Removed "risk management discount will be applied to the following year's renewal premium since dependent on the timing, the discount may be applied during the current year.

PRM-SRD-CW Ed. 7-01-2012 - Semi-Retired Discount

Reference to "practice hours" changed to "patient contact hours."

PRM-SRP-IL Ed. 7-01-2012 - Schedule Rating Plan

The Schedule Rating Plan provides for premium modification in cases where an insured may qualify for a credit or debit due to factors not contemplated in the filed rate structure of the company. Our Schedule Rating Plan is being amended so we may more effectively respond to those unique exposures.

{We are modeling our Schedule Rating Plan after the one used by Medical Protective Company for its Podiatrist claims-made program, as approved by your department on May 24, 2010, under filing # 10-HCP5-02.

PRM-SURG-CW Ed. 7-01-2012 - Surgical/Nonsurgical

Changed Rule title from "Surgical and NonSurgical Policy Definition."

Added the percentage discount (31.3%) applicable to NonSurgical coverage.

Moved "Prior Surgery Covered" from "Coverage Change Request" section of the prior rating manual to this rule.

Amended the surgical definition, consistent with verbiage on the Insurance Application, form PICA-2000 Ed. 4-11.

Removed statement that coverage is provided for procedures as authorized by state statutes/regulations.

PRM-TRM-CW Ed. 7-01-2012 - Policy Term

Clarified that the standard policy term is twelve consecutive months, instead of one year. Added verbiage, "or a policy may be extended for a short term."

PRM-VAR-CW Ed. 7-01-2012 - Veterans Administration Residency


Reference to "Optional Extension Coverage" changed to "Extended Reporting Period Coverage."

ILLINOIS CERTIFICATION OF
MEDICAL MALPRACTICE RATES

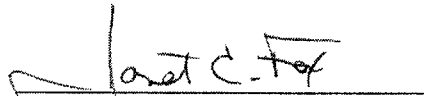
(215 ILCS 5/155.18)(c)(5) states that medical liability rates shall be certified in such filings by an officer of the company and a qualified actuary that the company's rates are based on sound actuarial principles and are not inconsistent with the company's experience.

I, Howard Friedman, ACAS, a qualified actuary, am authorized to certify on behalf of the Company making this filing that the company's rates are based on sound actuarial principles and are not inconsistent with the company's experience, and that I am knowledgeable of the laws, regulations and bulletins applicable to the policy rates that are subject of this filing.

I, Janet C. Fox, an officer of Podiatry Insurance Company of America, am authorized to certify on behalf of the Company making this filing that the company's rates are based on sound actuarial principles and are not inconsistent with the company's experience, and that I am knowledgeable of the laws, regulations and bulletins applicable to the policy rates that are subject of this filing.


Howard Friedman, ACAS

JANUARY 9, 2012
Date


Janet C. Fox, Assistant Secretary

JANUARY 6, 2012
Date

Insurance Company FEIN # 58-1403235 Filing Number IL-1757-P

Insurer's Address 3000 Meridian Boulevard; Suite 400

City Franklin State TN Zip Code 37067

Contact Person's:

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SERFF Tracking Number: PCAG-127904582 State: Illinois

Filing Company: Podiatry Insurance Company of America State Tracking Number: PCAG-127904582

Company Tracking Number: IL-1757-P

TOI: 11.2 Med Mal-Claims Made Only Sub-TOI: 11.2025 Podiatry

Product Name: Podiatrists Professional Liability Program

Project Name/Number: 2012 Podiatry Rules/IL-1757-P

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
12/16/2011	Supporting	Certification Document	01/10/2012	
12/16/2011	Rate and Rule	Extended Reporting Period Coverage	02/08/2012	PRM-ERP-IL Ed. 7-01-2012.pdf (Superseded)
12/16/2011	Rate and Rule	Leave of Absence	02/08/2012	PRM-LOA-CW Ed. 7-01-2012.pdf (Superseded)
12/16/2011	Rate and Rule	Premium Payment Plan	12/27/2011	PRM-PPP-IL Ed. 7-01-2012.pdf (Superseded)
12/16/2011	Rate and Rule	Risk Management Discount	04/18/2012	PRM-RMD-CW Ed. 7-01-2012.pdf (Superseded)
12/16/2011	Rate and Rule	Administrative Defense Coverage	02/09/2012	PRM-ADC-CW Ed. 7-01-2012.pdf (Superseded)

Podiatry Insurance Company of America Podiatric Rating Manual

Extended Reporting Period Coverage (Optional Extension Coverage) Illinois

Malpractice Liability

1. In the event of termination of this insurance by reason of non-renewal or cancellation by the Insured or if the Company shall cancel this policy or terminate it by refusing to renew for any reason, the Insured shall have the right to an Automatic Extended Reporting Period or an Optional Extended Reporting Period as follows:

- A. Automatic Extended Reporting Period

Upon termination of coverage, a 30-day Automatic Extended Reporting Period will be provided by the Company. The aggregate liability limit for this Automatic Extended Reporting Period shall be equal to the amount of coverage remaining in the policy's annual aggregate liability limit.

- B. Optional Extended Reporting Period

Upon payment of an additional premium calculated as described below, the Insured shall have the option to extend the claims reporting period for a period of unlimited duration, subject otherwise to the policy's terms, exclusions and conditions, to apply to claims first made against the insured and reported to the Company in writing following the effective date of such termination, but only by reason of malpractice which happened on or after the Retroactive Date and prior to the effective date of such termination, and which is otherwise covered by this insurance. This extended claims reporting period is referred to in the policy as the **OPTIONAL EXTENSION COVERAGE**.

If the Insured purchases this Optional Extended Reporting Period Coverage, it will replace the automatic Extended Reporting Period that is provided by the Company. The aggregate liability limit for this Optional Extended Reporting Period Coverage shall be equal to the amount of coverage remaining in the policy's annual aggregate liability limit.

2. The premium for the Optional Extended Reporting Period Coverage shall be the product of the applicable percentage factor in the following Table and the expiring annual premium of the policy.

<u>Years of Prior PICA Claims-Made Coverage</u>	<u>Percentage of 4th Year Claims-Made Premium</u>
One	100%
Two	155%
Three	175%
Four or More	180%

3. The number of consecutive years of prior claims-made coverage shall be determined as of the date the Optional Extended Reporting Period Coverage is purchased.
4. The availability of Extended Reporting Period coverage shall be governed by the following rules:
 - A. Available Limits of Liability shall not exceed those afforded under the current claims-made policy.
 - B. Extended Reporting Period Coverage applies to claims first made against the insured immediately following the effective date of cancellation or non-renewal; but only by reason of alleged malpractice which occurred on or after the retroactive date and prior to the effective date of cancellation or non-renewal (and which is otherwise covered by this insurance) for a period of unlimited duration.
 - C. Extended Reporting Period Coverage is granted at no charge in the event of death or permanent disability or in the event of permanent retirement at any age after five (5) years of continuous coverage. Permanent disability is defined as having existed continuously for not less than six (6) months, having rendered the Insured unable or incapable of practicing or continuing to practice, and expected to be continuous and permanent.
 - D. Extended Reporting Period coverage provided at no charge for retirement is a one-time benefit.
 - E. The insured may purchase Optional Extended Reporting Period Coverage. The insured is eligible for this coverage provided:
 - a. The insured requests Extended Reporting Period Coverage within thirty (30) days of the effective date of policy termination; and
 - b. Any outstanding premium with respect to the terminated policy is paid.
 - F. An insured who retires from practice will receive a discount from the applicable Extended Reporting Period Coverage premium for each consecutive year with PICA, excluding any period the insured was on Leave of Absence. These discounts are reflected in the following Table.

<u>Consecutive Years with PICA</u>	<u>Discount Applicable To Extended Reporting Period Coverage Premium</u>
1	20%
2	40%
3	60%
4	80%
5	100%

- G. Consideration may be given to new applicants to allow credit for consecutive years of coverage with another carrier subject to underwriting approval.
- H. Extended Reporting Period Coverage premium will be waived for policyholders who have been insured by PICA for ten (10) years and enter full time academia.
- I. The Company shall inform the Insured of the Optional Extended Reporting Period Coverage (ERP) premium at the time the last policy is purchased. The Company may not wait until the Insured requests to purchase the ERP to tell the Insured what the premium will be or how the premium would be calculated.
- J. The following discounts: Employed Podiatrist, New Practitioner, Part Time, Semi-Retired and Residency Director shall, if applicable, be applied when determining the final extended reporting period premium.

The following discounts: Leave of Absence and Risk Management shall not be applied when determining the final extended reporting period premium.
- K. The Company will offer the Extended Reporting Period Coverage when the policy is terminated for any reason, including non-payment of premium, and whether the policy is terminated at the company's or insured's request.

General Liability

- 1. In the event of the termination of this insurance by reason of non-renewal or cancellation by the Insured or if the Company shall cancel this policy or terminate it by refusing to renew for any reason, the insured shall have the right to an automatic Extended Reporting Period or an Optional Extended Reporting Period as follows:
 - A. Automatic Extended Reporting Period

Upon termination of coverage, a 60-day automatic Extended Reporting Period will be provided by the Company. The aggregate liability limit for this automatic Extended Reporting Period shall be equal to the amount of coverage remaining in the policy's annual aggregate liability limit.
 - B. Optional Extended Reporting Period

The Insured shall have the option to extend the claims reporting period, subject otherwise to the policy's terms, exclusions and conditions, to apply to claims first made against the insured and reported to the Company in writing following the effective date of such termination, but only by reason of Business Premises Liability, Office Premises Medical Payments or Personal Injury Liability which happened on or after the Retroactive Date and prior to the effective date of such termination, and which is otherwise covered by this insurance. This extended claims reporting period is referred to in this policy as the OPTIONAL EXTENSION COVERAGE.

Two Optional Extended Reporting Period options are available:

- 1) Unlimited Extended Reporting Period - For General Liability, there is no additional premium charge for an unlimited reporting period under the Optional Extended Reporting Period Coverage. Under the option of an unlimited extended reporting period, 100% of the aggregate liability limit of the current claims-made policy shall be reinstated for the duration of the extended reporting period.
- 2) Five-Year Extended Reporting Period - For General Liability, if the insured does not choose the free unlimited reporting period coverage, the insured will be provided a free five-year extended reporting period after the free 60-day Automatic Extended Reporting Period. Under the option of a free five-year extended reporting period, the aggregate liability limit shall be equal to the amount of coverage remaining in the policy's annual aggregate liability limit at termination.

If the Insured selects an Optional Extended Reporting Period, it will replace the Automatic Extended Reporting Period that is provided by the Company.

2. The insured is eligible for the Optional Extended Reporting Period coverage provided:
 - a. The insured requests Extended Reporting Period Coverage within sixty (60) days of the effective date of termination; and
 - b. any outstanding premium with respect to the terminated policy is paid
3. The Company will offer the Extended Reporting Period Coverage when the policy is terminated for any reason, including non-payment of premium, and whether the policy is terminated at the company's or insured's request.

Podiatry Insurance Company of America

Podiatric Rating Manual

Leave of Absence

1. The Leave of Absence endorsement interrupts the premium and policy due to the insured's temporary cessation of practice for a minimum of 30 days, not to exceed 12 consecutive months, in special circumstances. These circumstances include, but are not limited to, illness, childbirth, sabbatical leave, additional training, humanitarian projects, military assignments, absences pursuant to the Family and Medical Leave Act, and other situations as approved by the Underwriting Department.
2. A premium rate of 25% of the practitioner's current premium calculated on a pro rata basis will apply.
3. Reinstatement will be made, subject to the company's approval, upon the insured's return to practice.

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Premium Payment Plan - Illinois

The following payment options are available:

1. Payment in full – No additional fees/charges.
2. Two Payment Plan – No additional fees/charges.
3. Five Payment Plan – First installment of 25% due (as a down payment) when the policy is issued/renewed. Four remaining installments due every other month. Finance charge (9.5% APR) applies to all policyholders except new practitioners, residents and preceptees.
4. Ten Payment Plan – First installment of 15% due (as a down payment) when the policy is issued/renewed. Nine remaining payments due each month. Finance charge (9.5% APR) applies to all policyholders except new practitioners, residents and preceptees. Ten equal payments of 10%.
5. Quarterly Installment Plan – Four equal payments of 25%. Installment fee of \$25 or 1% of the total annual premium, whichever is less. First installment due (as a down payment) when the policy is issued/renewed. Three remaining installments due 3, 6 and 9 months from policy inception. The Company shall not apply interest charges.

In the event that an insured makes a payment after the due date, a flat late fee of \$10.00 will be charged.

Additional premium due as the result of a policy change will be spread over the remaining installments, if any. If there are no remaining installments, additional premium due will be billed immediately as a separate transaction.

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Risk Management Discount

10% Discount	For completion of a Home Study Course or attendance at a PICA/ Podiatry Institute Meeting.
5%-15% Discount	For attendance at a PICA designated risk management meeting which may be a component of an existing podiatric conference. Meeting qualification and discount level will be based on the structure and composition of the meeting.
10% Discount	For new applicants who have completed a risk management program which would have qualified for a risk management discount with their previous carrier.
15%	Maximum Risk Management Discount available under this rating rule.

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Administrative Defense Coverage

1. The Administrative Defense Endorsement covers medical licensing board actions, hospital medical staff peer review actions, managed care decertification actions and Medicaid/Medicare (and other payor) billing and coding errors and omissions.
2. Included in the current premium, this coverage will be attached by endorsement to all podiatric policies.